

NINETY YEARS AGO, JULY 1920

In "A Review of the Goitre Situation," [read before the St. Joseph's Hospital Staff Association], J. James Shaughnessy, MD, considered the problem especially prevalent in southern Minnesota, where he had trained: "There the word goitre was almost a household word and we had occasion to observe goiters of every type ... It was common ... to observe practically every female member of many families showing enlarged thyroids." He had found the condition even in newborns. The author hypothesized that one cause lay in "the chemistry of the water supply and of the soil." He noted: "...the use of the x-ray is being advocated and it is claimed that results follow. With its use the writer has no personal experience."

An Editorial, "The Mental Defect," questioned a ruling of the Penal and Charitable Board, which barred a young girl from the School for Feeble Minded. The girl was "obviously a mental defect and so found after examination by a competent psychiatrist." The reason lay with her residency-status. "...her mother and father, dead or unknown for nearly 15 years, were not residents of this State..." The girl lived with an aunt who was a resident of RI; nevertheless, the board ruled that the girl was not a resident and consequently not eligible for admission. The Editor concluded: "While such a ruling may be in strict accordance with the law, it opens up the interesting speculation as to what the ruling will be when the Board has to decide what shall be done with the progeny of such a case: if such a one be not safeguarded against the acts which her mentality cannot guard against."

In "Chronic Cases and Irregular Practitioners," the Editor decried the claims of faith-healers. Even if the healer's care didn't directly harm the patient, it might deter him from seeking more effective care. "For example, an individual suffering, without knowing it, from chronic simple glaucoma, will experience 'good and bad' days. Should such a case follow the advice as given by this clergyman not to expect an immediate cure, but to continue to the faith and to pray diligently, much valuable time would be lost and vision sacrificed." The Editor went on to blame medical professionals' "lack of interest in chronic diseases." The physician, after the diagnosis, often drops the case "because, forsooth, he has no cure." The Editor: "So much can be done in incurable cases by relieving symptoms, and physicians fail in their duty when they coldly disregard the chronic case and pass it on to whatsoever irregular healer may be encountered."

FIFTY YEARS AGO, JULY 1960

Robert H. Felix, MD, Director, National Institute of Mental Health, NIH, gave the Ninth Annual Arthur Hiler Ruggles Oration: "Recent Developments in Mental Health Research." He credited Congress for major advances in mental health, especially Congressman John Fogarty (D-RI), "...who, with great wisdom and foresight has consistently supported mental health activities." Dr. Felix cited the improved understanding of the brain and central nervous system, the trends in psychological and sociological approaches, research in the process of aging, and early diagnostic programs.

In "Hospital Admission X-Rays in Detection of Tuberculosis, Theodore L. Badger, MD, Harvard Medical School, recounted statistics: in 1956, in the United States, there were 14,000 deaths from

tuberculosis, 69,000 new cases, and a reservoir of 400,000 cases. The reservoir included "recalcitrants." "While these people will not report their TB, they will be hospitalized for cardiac or other disease, and a hospital admission x ray will pick them up as tuberculosis cases." He judged these x-rays "more than twice as productive as mass community screening." In Boston, 75% of all reportable TB cases were reported from hospital x-ray programs.

In "Isolation Perfusion of Body Regions in the treatment of Cancer: Experimental and Clinical Observations," Lester L. Vargas, MD, William P. Corvese, MD, Clarence H. Soderberg, MD, John D. Pitts, MD, Thomas Forsythe, MD, and Herbert Fanger, MD, used two groups of "unselected mongrel dogs." They concluded: "Regional perfusion of the pelvis or of an extremity with an extracorporeal circulation affords a method of utilizing high doses of cytotoxic drugs with minimal danger of systemic poisoning."

An Editorial, "Only 1 Negative Vote," deplored the legislative passage of a proposal allowing "chiropractic physicians to render 'medical care' to recipients of public assistance." (Governor Del Sesto vetoed the measure.)

In "Summary of Medical, Public Health and Allied Legislation before the RI General Assembly, January Session, 1960," the Committee on Public Laws of the RIMS noted that the General Assembly passed, and the Governor vetoed, "a proposal for a legislative commission to study the need for a medical school, with a \$5,000 appropriation."

TWENTY-FIVE YEARS AGO, JULY 1985

Stanley M. Aronson, MD, in "The Private Physician and the Public Health," introduced this issue, focused on public health. He cited the first four cases of cholera reported, in July 1832. Afterward, a voluntary committee of RI physicians agreed to issue a report to authorities. Their report cited 4 requirements for safety: "temperance, cleanliness, ventilation, fearlessness." Yet cholera persisted; quarantine and sanitary measures were "patently ineffective." In August 3, 1849, President Zachary Taylor proclaimed a national fast day. In 1856 Providence appointed Dr. Edwin Snow as its first Superintendent of Health. When he retired in 1884, the 28-year old Charles Value Chapin, trained at Bellevue, took over. He served until 1931. Dr. Charles Fischer was appointed to head the Rhode Island Board of Health in 1878.

On the "President's Page," Herbert Rakatansky, MD, asserted "RI is Behind the Times," which he judged a compliment. Specifically, the state had only two major alternative delivery systems (RIGHA and Ocean State), and no for-profit hospitals. (In Georgia, by contrast, 25% of hospitals were for-profit.)

John Tierney, Deputy Director, RI Department of Health, contributed "The Cannon Years: 1961-1984." "His most significant and enduring contribution as Director of Health was cultivating a spirit of professionalism and scientific inquiry."

H. Denman Scott, MD, Director, Department of Health, contributed "Contemporary Issues in Public Health."

"Inside the Rhode Island Department of Health: Special Report," outlined the organizational structure of the Department.